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FIVE YEARS OF HEALTH DEMONSTRATION
in SYRACUSE—A SUMMARY



THE Syracuse Health Demonstration began in May, 1923. For some years, Syracuse with its 200,000 population, had had a representative Department of Health, modern hospitals, an active Academy of Medicine, a medical school of wide influence, several voluntary public health organizations and the other facilities for the conservation and promotion of individual and community health usually found in a city of its size. The local Common Council, the Board of Estimate and Apportionment, the Chamber of Commerce, the Academy of Medicine, the College of Medicine of Syracuse University, joined with various other health and welfare agencies, civic organizations, industrial groups, public officials and private citi-

zens in urging the selection of Syracuse as an urban health demonstration center and voiced assurances of their cooperation in carrying out the project. It was proposed to extend the health services already in existence; and within its financial ability to do so, the City undertook to assume responsibility for the continuation of various phases of the more intensive health program as soon as the permanent usefulness of any given service became apparent. At the close of the fifth year of operation, it is natural that the accomplishments of the first period of intensive work in the demonstration be reviewed and evaluated.

The task of helping to amplify activities that have been established for years without impairing their service is often more difficult than to guide the inauguration of a public health service and to create the machinery for its operation in virgin territory. The Syracuse Health Department had had a very creditable record of achievements before the health demonstration was inaugurated, among them the distinction of having established the first tuberculosis clinic in up-State New York, and an unbroken record of over

FIVE years of experience in the Syracuse Health Demonstration is reviewed briefly in the introductory pages of this issue of the *Quarterly Bulletin*. Increased health activities have been developed and maintained by the City's official health bodies, including the Syracuse Department of Health and the Department of Public Instruction, and by cooperating voluntary health agencies of the City. (During the half-decade the City has increased its appropriation for public health work by approximately \$162,000. Public health work was established as a department activity in 1920.

thirty years without a death from smallpox. A community with such a record is justified in questioning any new plan in health procedure and in demanding solid accomplishments

before new activities are definitely made a part of its permanent health program.

IN the current year, new full-time health officers have been appointed in New York City, in Syracuse, and in Cattaraugus County. Cattaraugus County and Syracuse thus became the first county and the city of the second class respectively in New York State to provide full-time health officers. These appointments are reported on page 95. (Edgar Sydenstricker, who, since 1926, has been acting as statistical consultant for the Fund, became director of its division of research on July first. His appointment is announced on page 105.

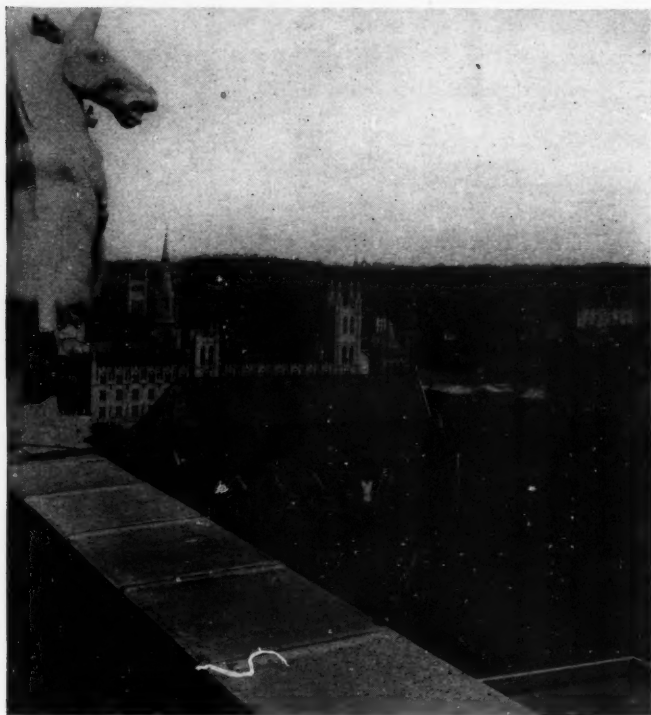
Administrative success is measured by the results obtained. However, to omit reference to some of the steps which the Syracuse Health Department has taken to improve its health machinery would be to disregard an important part of its development. Without this information much of the real progress of

the past five years could not be appreciated.

In this period the personnel of the Department of Health has been increased from forty-five full-time and thirty-three part-time employees, under a part-time Commissioner of Health, to ninety-eight full-time and twenty-eight part-time workers. (A full-time Health Commissioner salaried entirely from public funds was appointed on August 1, 1928.)

Public health nursing, communicable disease control, vital statistics and record keeping, and food inspection are now carried on by separate bureaus, supervised by interested and alert directors.

In 1923 the Health Department employed nine nurses for



specialized services. There are now thirty-two staff nurses, three district supervisors, three special nurse instructors, and a nutritionist, under a full-time director, in the Department's Bureau of Nursing. This staff carries on a generalized public health nursing service in the City. Nursing service is provided for prenatal, well-baby, preschool, vaccination, diphtheria prevention, chest, and infantile paralysis after-care clinics.

The Bureau of Tuberculosis supervises two tuberculosis clinics holding nine tuberculosis clinic sessions each week, as



against three such weekly clinic sessions prior to 1923. The chest clinic attendance during 1927 eclipsed all previous records. The number of clinic visits was 3,957—double the clinic attendance in 1924.

Sanatorium facilities for the City's tuberculous patients now exceed the National Tuberculosis Association's standard of one bed per annual death. The Onondaga Sanatorium has been enlarged and in the near future will have

a capacity of 220 beds for tuberculous patients.

The statistical and clerical activities of the Bureau of Tuberculosis have shown marked improvement during the past two years. A new record system of outstanding merit has been adopted; and an intensive case-finding survey is being completed.

Case reporting of tuberculosis has been excellent in Syracuse during the past six years. The ratio per annual death of newly reported cases filed in one year was 2.4 in 1922; 2.3 in 1923; 3.0 in 1924; 2.8 in 1925; 2.4 in 1926; and 3.0 in 1927.

These ratios, taken singly, are not especially high for any one year, but the maintenance of so high a ratio for six successive years constitutes a very favorable record.

The total number of known cases of tuberculosis on file increased from 866 at the close of 1924 to 1,101 at the close of 1926, and 1,284 at the close of 1927. The number of known active cases has grown from 595 on December 31, 1924, to 913 at the close of 1927, the ratio per annual death of known active cases increasing from 4.8 at the close of 1924 to 7.9 at the end of 1927.

The course of the tuberculosis death rate in Syracuse (including Onondaga Sanatorium) has been practically on a level since 1921, although the corrected rate of 59.0 for 1927 is the lowest corrected rate ever recorded.

A part-time director of the Bureau of Communicable Diseases has supervision of all the activities for the prevention and control of the communicable diseases, including general supervision of the City Hospital. Educational nursing for contagious conditions is carried on by the public health nurses.

Intensive campaigns for the immunization of children against diphtheria have been carried on in Syracuse by the Department of Health in cooperation with the school health service and the State Department of Health. At the end of 1927 three immunizing treatments had been given 19,161 children. In addition, 4,461 children had been found to have negative Schick tests and therefore were not given the treatments. In other words, approximately 23,000 children in Syracuse have been either actively immunized against diphtheria or found to possess a natural immunity.

The work in maternity, infancy and child hygiene was formerly divided among the Bureau of Child Hygiene of the Department of Health; the Child Health Committee, a local

agency receiving its funds from the Community Chest; the Visiting Nurse Association; and other voluntary agencies. A complete program for child welfare has now been centered under the direction of the Bureau of Child Hygiene. This program includes prenatal service, well-baby clinics, and a clinic for children of preschool age. Prenatal service, while carried on under the auspices of the Child Health Committee, is integrated with the service of the Bureau of Nursing of the Health Department. Infant welfare, or well-baby service, for babies under one year of age is carried on in weekly sessions at ten clinic stations.

In 1927 the Bureau of Venereal Disease Control supplied 17,935 clinic treatments to patients, as against 6,417 such treatments in 1923. There were but 556 new cases admitted to the clinics in 1923, while last year 1,044 new cases were admitted.

Every contact of physician, nurse, dental hygienist, or other health worker with the public, has an educational value, and a substantial part of the time of each worker is devoted to the educational aspects of health work. As in many other cities, however, a program of instruction in the principles of health and prevention of disease has been organized in Syracuse. In setting up the demonstration program in Syracuse, health education in this broader sense was planned as a distinct activity through the establishment of a Bureau of Health Education in the Syracuse Department of Health. This bureau also assumes responsibility for bringing official health information to the public, utilizing periodicals, newspaper articles, addresses, motion picture films, and various forms of exhibits. The Department of Health issues two regular publications, a weekly bulletin directed chiefly to physicians, nurses and health workers, and an illustrated popular magazine, *Better Health*, which now appears monthly.

Health articles are sent regularly to the three Syracuse daily newspapers. Each of these publications has issued special health supplements, made up largely of articles on health written by health workers of Syracuse.

In addition to the work of this bureau, programs in health education, specialized for school children, are carried out in the public and parochial schools. As a part of its work, the Onondaga Health Association is also active in carrying out a general health instruction program.

Medical inspection in the public and parochial schools, carried on under the Department of Public Instruction and the Department of Health respectively, has since 1926 been supervised by a single director. By this arrangement the routine of health service in the two school systems can approximate uniformity. Forty-eight workers, including medical examiners, nurses, dentists, dental hygienists, an orthopedist, a psychiatrist, a psychologist, a psychiatric social worker, an aurist and a refractionist, are now engaged in protecting the health of the children in the Syracuse public schools. Only twenty-seven such workers were employed at the beginning of 1923. Four medical inspectors, a dental hygienist, and a health teacher, aided by the public health nurses of the Department of Health, carry on health work in the parochial schools.

More intensive physical examinations made three times in the elementary school life of each child, rather than the more hurried type of yearly examination, have decreased the total number of examinations; however, the number of corrections brought about under the new system has increased from 4,183 in the school year 1923-1924 to 7,415 in 1927-1928.

Mentally retarded children have been examined as a part of this service, and, when necessary, recommended for admission to special classes. Goiter surveys have been made

of school children, and upon discovery of demonstrable goiter, efforts have been made to have the defect corrected. Pupils have been examined for defective vision and hearing; and underweight children who have been absent frequently from school, who have shown symptoms of tuberculosis, or who are contacts of cases of tuberculosis have been examined by a special examiner.

Instruction regarding the advantages of proper diet, fresh air and sunlight, of exercise and rest and regarding other health subject matter has been so integrated into the teaching of the regular school subjects that it is now a part of the regular school curricula.

During the demonstration period, closer coordination has been effected among the health and welfare agencies of Syracuse through a health council, composed of representatives of the various organizations. In almost every instance these agencies have increased the amount of their expenditures in time and money for health work. The Onondaga Health Association, for example, has increased its yearly budget from \$25,913 in 1923 to \$43,768 in 1928, and the number of its workers from five to eleven.

A nutrition program has been carried on for the past two years by the nutrition specialists attached to the Bureau of Nursing of the Department of Health, to the public schools and to the Syracuse Thrift Kitchen. Similarly, to bring about needed coordination and the fuller development of a mental hygiene program for the community, a mental hygiene committee of forty-two persons has been appointed by the Onondaga Health Association. The principal functions of this committee are to promote interest in mental hygiene and to assist in securing improved facilities for the discovery, treatment and prevention of nervous disorders, insanity and mental deficiency.

The increase in the interest shown by the public in the work of the health demonstration, and in the general understanding of the aims and principles of the demonstration has also been evidenced by the appointment, with the consent and approval of the Mayor, of a Citizens' Committee on the Syracuse Health Demonstration to which reports of progress are made and which assists in supporting and carrying out the purposes of the project.

An increase during the demonstration period of approximately \$116,000 in the City's annual budget for the work of the Health Department, and an increase of approximately \$46,000 in the annual appropriations for health work in the public schools, indicates that the additional health services have aroused a general support among the citizens of Syracuse. All of the services which had received support from, or were maintained entirely by demonstration funds, participated in this transfer to local support. In addition, a new communicable disease hospital of fire-proof construction has been built from City funds.



NEW HEALTH OFFICERS *for* SYRACUSE, CATTARAUGUS COUNTY *and* NEW YORK CITY

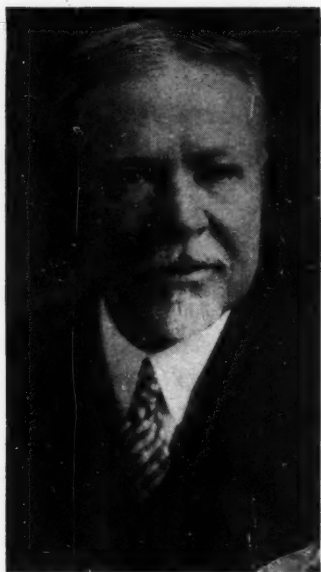


DURING the past summer, New York City, scene of the metropolitan, Syracuse, scene of the urban, and Cattaraugus County, scene of the rural health demonstration, installed new and full-time health officers into their respective health administrations. Dr. Shirley W. Wynne, former Deputy Commissioner, became Commissioner of Health of the City of New York on August 17, 1928. On August first, Dr. George C. Ruhland had been inducted into office as Health Commissioner of Syracuse, having served as deputy for some years previously. On September seventh, Dr. Reginald M. Atwater, having been for over eight months acting county health officer, was formally appointed Health Officer of Cattaraugus County.

In all these instances, the entire salaries of these administrators are paid from local public funds. For many years New York City has maintained a full-time health officer; and Dr. Wynne is one of a number of able executives who have served the City in this capacity. Cattaraugus County, which in 1923 appointed the County's and the State's first county health officer, on January 1, 1928, made provision in its local budget for payment of the entire salary of this official.* Dr. Atwater is the first health administrator to serve under this arrangement. Similarly, through his appointment on August first, Dr. Ruhland has the distinction of being the first health officer of Syracuse and the first in any city in New York State outside of New York City to be required by the terms of his appointment to give his full time to his official duties.

Commenting upon these appointments, Dr. Matthias

* One-half of this expenditure is returned from the State Treasury under the provisions of Chapter 278, of the laws of 1924, whereby one-half a County's expenditures for health work are returned in the form of State aid.



DR. MATTHIAS NICOLL, JR.,
*Commissioner of Health of the
State of New York*

Nicoll, Jr., State Commissioner of Health, said that in his opinion "the most important events which have marked the progress of public health in this State during the past few years has been the establishment of the county health unit, with a full-time qualified health officer as administrator. The establishment of such a unit in Cattaraugus County is now to be followed by one in the county of Suffolk. In both instances, the county authorities are assuming responsibility for the payment of adequate salaries to the county health officers. In the City of Syracuse the same

principle has been adopted, which it is to be hoped will serve as an example to other large cities of the State and inevitably be followed by constructive, co-ordinated and continuous administration of municipal public health. In the City of New York the Mayor has shown wisdom and understanding of the importance of public health work by first appointing to the office of Commissioner of Health a man thoroughly qualified by experience and training—Dr. Louis I. Harris—and, upon his recent resignation, appointing to the vacancy the Deputy Commissioner, Dr. Shirley W. Wynne, whose qualifications are not open to dispute.

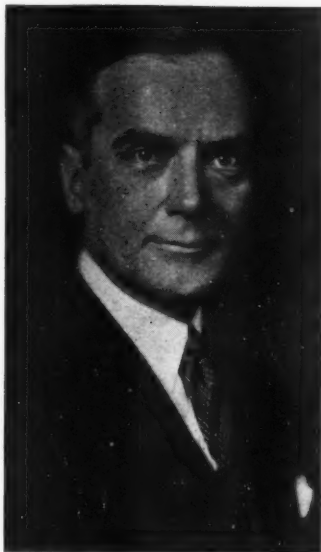
"The progress of public health work seems at times to be very slow and, not infrequently, discouraging," Dr. Nicoll

concluded. "This is especially true of local public health administration, but taken as a whole, as observed by Dr. Hermann M. Biggs, it never goes backward. Fundamental principles, essential to its betterment, have come to be so generally recognized that they are certain to be adopted sooner or later through the pressure of public opinion."

As a member of the New York City Health Department, Dr. Wynne has been interested in the Bellevue-Yorkville Health Demonstration since its origin. He believes that the undertaking has an "important place in the health work of the City. Because of the necessity of setting up a yearly budget which must be spent in accordance with definite rules and regulations, and because of the necessity of city government employees being appointed from Civil Service lists, it is difficult," he says, "to inaugurate new functions and almost impossible to undertake experimental work in health administration. Therefore, a demonstration such as the Bellevue - Yorkville, financed by private funds, affords the health officials of the City an unusual opportunity to try out new methods.

"It was the purpose of the demonstration not just to throw an additional force into the district because, with the expenditure of \$200,000 a year in any district, health conditions can be improved; but it

DR. SHIRLEY W. WYNNE,
*Commissioner of Health of the
City of New York.*





DR. GEORGE C. RUHLAND,
*First full-time Commissioner of Health
of Syracuse.*

was to enable the Department of Health to bring about closer co-operation of the official and unofficial agencies and to eliminate overlapping in their work.

"I propose to use the demonstration area as a laboratory in which new methods may be tried out," continues Commissioner Wynne. "I have already planned two definite changes in our present methods which, beginning October first, will be given a trial in this area, and if they prove satisfactory, they will be as rapidly as possible extended to the entire City.

"We have long discussed the pros and cons of local health centers. Such centers have many advantages and not a few disadvantages. Here is an opportunity under most favorable conditions to give the health center idea a thorough and impartial trial," Dr. Wynne says.

Dr. Ruhland's appointment came upon the resignation of Dr. Herman G. Weiskotten, who in retiring said that "the position entailed great responsibilities which were vital to the best interests of the City and that the position should be filled by a competent full-time public health administrator." His responsibilities as Dean of the College of Medicine of Syracuse University were such that "he could not hope to do them justice and continue as Commissioner of Health,"

stated Dr. Weiskotten in tendering his resignation.

Appointment of a full-time health officer is an arrangement "that should have been made many years ago, even though it involved a necessary increase in salary," said the Syracuse Herald editorially. "If the heads of other municipal departments, including of course, the Police and Fire Departments, are bound to devote their undivided attention to the city's needs and interests in their respective lines, surely the same rule should be applied to the official who is held responsible for municipal sanitation and hygiene, or more comprehensively, for the public health so far as it can be protected by vigilantly enforced laws and ordinances."

Dr. Atwater, who was formerly on the faculty of the Harvard School of Public Health, succeeded Dr. Stephen A. Douglass who resigned as county health officer to become medical field secretary of the National Tuberculosis Association. In a state where no such measure had been previously tried, to have demonstrated in six years the practicability and desirability of using the country as a public health administrative unit has been well worth all the Cattaraugus County Health Demonstration has cost, in the opinion of Dr. Atwater. "Rural health can be more adequately protected when the unit is an area larger than the township or

DR. REGINALD M. ATWATER,
*Full-time Health Officer of Cattaraugus
County.*



village. Now that this fact has been demonstrated within the State of New York, the northeastern portion of the United States is going to see the proof of this fact and, it may be hoped, will profit thereby," Dr. Atwater believes.

"The demonstration has served in Cattaraugus to stimulate public interest in, and to carry the burden of support for, the County health administration during the years when its usefulness was becoming apparent to the citizens of the County. The people of the County and the officials are of one accord in their intention of permanently carrying on this undertaking at local expense. Progress in health organization has recently been very rapid in the large cities. It is easy for those in the cities to criticize the belated country districts and their health organization. It is to the credit of the rural people in Cattaraugus County that they have in innumerable ways signified their interest in and, indeed, their enthusiasm for an adequate local health service."



NEWS DIGEST

of the NEW YORK HEALTH DEMONSTRATIONS

HOMER FOLKS cites the leading editorial in the *Saturday Evening Post* of August 25, 1928, as "gratifying and convincing evidence of a recent change in the public mind regarding the objective of public health work. Popular thought," he says, "seems increasingly to be considering the results of health work in the terms of prolongation of life rather than simply of reduction in the death rate as expressed in terms of a percentage."

The editorial entitled, "Nine Years Going Begging," says in part: "The richest and the least-worked mine of health, happiness and potential wealth lies in the field of preventive medicine. The achievements of modern medicine during the past thirty or forty years may be fairly called stupendous; and yet so much remains to be done for the organized conservation of health and life and physical well-being that the battles of the future press

harder for attention than the victories of the past.

"Tuberculosis has been bereft of much of its old terror. Diphtheria, the dread menace of childhood, is in full retreat and would have long ago been routed except for ignorance and prejudice. . . . The results of these and of other advances is that during the past generation nine years have been added to the span of human life. . . . With nine extra years of life going begging, such matters are worth thinking about and worth doing something about."



IN common with most other American cities Syracuse experienced a higher death rate in April and May than usual. In sharp contrast, the Cattaraugus County death rate for the first six months of 1928 was very slightly higher than that of the two previous years and its monthly rate showed no unusual variation. The graphs

in the accompanying diagram are plotted from the following figures:

Deaths from all causes per 100,000 population, by months (annual basis), January to June, in Syracuse and in Cattaraugus County, 1925-1928.

Month	1925	1926	1927	1928
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Syracuse

January-June....	13.6	14.5	13.3	14.2
January....	14.1	12.3	14.6	11.5
February....	14.2	14.0	15.6	13.4
March....	14.1	22.3	12.9	13.8
April.....	15.0	12.3	12.3	17.2
May.....	13.3	13.4	12.5	17.0
June.....	10.7	12.6	12.0	12.6

Cattaraugus County

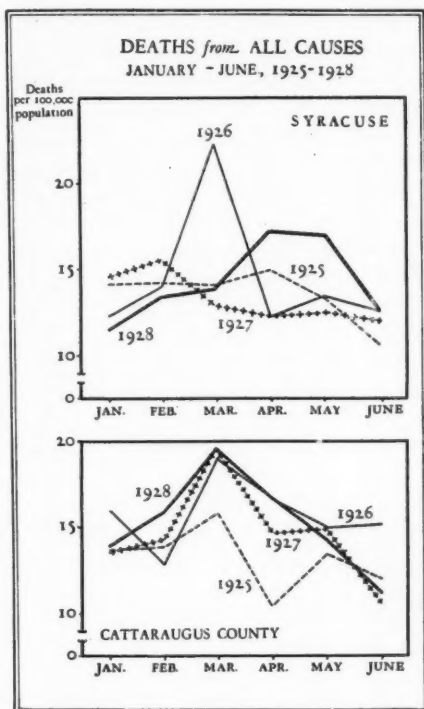
January-June....	13.2	15.8	14.7	15.3
January....	13.7	16.0	13.6	13.9
February....	13.8	12.8	14.3	15.9
March....	15.8	19.0	19.5	19.6
April.....	10.5	16.7	14.7	16.7
May.....	13.4	14.9	14.8	14.3
June.....	12.0	15.2	10.6	11.2

AN examination of the Syracuse mortality statistics in more detail reveals the facts: first, that the principal causes of this increase in the death rate in the late spring were respiratory; second, that the rise in the death rate from respiratory causes was accompanied by an increase in the number of deaths from circulatory conditions. The correla-

tion of these two groups of causes, at least since the present epidemic influenza epoch began, has been frequently noted in several localities throughout the country. The Syracuse experience for 1928 is quite clear, as the following comparison shows:

Number of cases of and deaths from pneumonia and number of deaths from diseases of the circulatory system, in Syracuse, January to June, 1925-1928.

(a) Pneumonia Cases		
Month	Range 1925-27	1928
January....	36-83	90
February....	50-76	75
March.....	68-221	126
April.....	33-98	197
May.....	31-60	217
June.....	24-53	67
(b) Pneumonia Deaths		
Month	Range 1925-27	1928
January....	19-38	14
February....	19-34	10
March.....	21-55	26
April.....	16-24	43
May.....	15-20	33
June.....	13-17	20
(c) Deaths from Heart and other Circulatory Diseases		
Month	Range 1925-27	1928
January....	47-80	44
February....	54-60	65
March.....	35-94	53
April.....	51-57	76
May.....	44-60	72
June.....	37-56	44



Deaths from all causes per 100,000 population, by months (annual basis), January to June, in Syracuse and in Cattaraugus County, 1925-1928.

The figures in italics exceed the maxima for the corresponding months of the preceding three years. In fact, not since 1918 or 1920 has the April or May pneumonia death rate for Syracuse been as high as they were in 1928. The fact that only eleven deaths from influ-

enza were recorded in the six months period indicates the absence of the epidemic form of the disease. The Syracuse experience is generally similar to that of the country in general.*

Syracuse also experienced a continuation of the epidemic wave of measles which began about January, 1926. The decline in the number of cases in June, 1928, as compared with the two years preceding, as well as its total recorded incidence, presages the end of this epidemic wave. Previous epidemics in Syracuse have lasted not longer than two successive years. Scarlet fever, whooping cough and

chicken pox were also more prevalent during the first half of 1928 than in the corresponding period of 1927. The

*See United States Public Health Service: Public Health Reports for Aug. 3, 1928. Statistical Bulletins of the Metropolitan Life Insurance Company for June and July, 1928.

recorded cancer death rate was considerably higher than in any previous year.

Cattaraugus County also experienced a higher prevalence of some communicable diseases, chiefly measles and whooping cough. The death rate from heart disease was higher than that for 1927, although, as pointed out above, the death rate from respiratory causes was not in excess of the seasonal expectancy.

Deaths of children under one year of age, per 1,000 live births (infant mortality) by months, January to June, in Syracuse and in Cattaraugus County, 1925-1928.

Month	1925	1926	1927	1928
Syracuse				
Total for six months	71.4	76.8	64.0	67.8
January...	79.4	37.8	70.2	39.0
February...	60.2	83.1	107.6	49.6
March....	64.0	108.1	58.8	83.3
April.....	104.3	53.0	62.7	95.6
May.....	67.1	85.5	37.2	92.1
June.....	55.9	89.5	49.3	42.2

Cattaraugus County

Total for six months	58.6	81.2	54.0	63.1
January...	56.0	37.3	77.6	57.1
February...	76.1	75.6	37.0	78.4
March....	71.4	77.6	104.8	115.0
April.....	110.2	117.6	30.5	56.0
May.....	25.0	88.5	15.5	56.0
June.....	23.8	91.7	61.4	36.0

THE infant mortality rate in both Syracuse and Cattaraugus for the first six months of 1928 maintained a relatively low level, as the accompanying table shows:

The infant mortality rate for Syracuse was unusually high in April and May. Whether or not this was due to the respiratory conditions which resulted in an increased mortality at other ages in the same months cannot be determined until more detailed data are at hand.

The tuberculosis death rate in Cattaraugus County continued on the low level of 1925-1927. Without comparable statistics for Syracuse, since the

reports on deaths of Syracuse residents in the Onondaga Sanatorium have not yet been made available, it is difficult to make any definite comment; it appears, however, that the reported tuberculosis death rate for the first half of 1928 is slightly higher than for the corresponding period in 1925, 1926, or 1927.

THE Assembly Room of the Bellevue - Yorkville Health Center will be used during the academic year 1928-1929 as a meeting room for a course on the Principles and Problems of the Public Health Movement which will be offered by Columbia University Extension in cooperation with the De Lamar Institute of Public Health and the National Health Council. The course will be given under the direction of Dr. Philip P. Jacobs, Publicity Director of the National Tuberculosis Association, and is designed to give the student "a broad cultural and informational background on the principal problems of the public health movement."



ON July 1, Edgar Sydenstricker, who has had charge of the office of statistical investigations of the United States Public Health Service for a number of years, became director of the division of research of the Milbank Memorial Fund. Two years ago he was authorized by Surgeon General Hugh S. Cumming to act as consultant to the Fund on statistical phases of the New York Health Demonstrations. As director of research of the

Fund, Mr. Sydenstricker still retains his status as statistician in the Service, acting in an advisory capacity on its statistical work and assisting in its epidemiological and statistical studies. The new arrangement again evidences the interest which Dr. Cumming, who is a member of the Advisory Council, has shown in the Demonstrations since their inception as well as his interest in the development of the new division of research.

EDGAR SYDENSTRICKER,
*appointed on July 1, 1928, as director
of the division of research of the Milbank
Memorial Fund.*





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State Committee on Tuberculosis and Public Health

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REGINALD M. ATWATER, M.D., *County Health Officer*

County School Health Service

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County Tuberculosis and Public Health Association

C. A. GREENLEAF, M.D., *President*

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Syracuse Health Department

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and *Director*, Syracuse Health Demonstration

Department of Public Instruction, Health Service

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G. CARL ALVERSON, *Superintendent of*
Schools

JOSEPH C. PALMER, M.D., *Director*, School Health Service

The Onondaga Health Association

T. AARON LEVY, *President*

ARTHUR W. TOWNE, *Secretary*

Citizens' Committee on the Syracuse Health Demonstration

GILES H. STILWELL, *Chairman*

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Including the New York City Department of Health

BELLEVUE-YORKVILLE HEALTH DEMONSTRATION

in THE CITY OF NEW YORK

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LILLIAN D. WALD, R.N., *Second Vice-*

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Chairman

Chairman

ALTA E. DINES, R.N., *Secretary*

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